



- Intake Information Completed on enrollment
  - Assessment
    - ✓ Life Skills completed
    - ✓ Spiritual completed
    - ✓ Learning Style
- Growth Plan
  - Goals
    - ✓ Evan's short term goals include:
      - Interested in learning the Restaurant Business
      - Complete Life Skill Curriculum demonstrated by
        - ❖ Consistently make good choices and decisions
        - ❖ Successful management of money
        - ❖ Healthy living habits
        - ❖ Positive and healthy relationships
        - ❖ Time management skills
        - ❖ Obtain employment
        - ❖ Development of skills to be successfully independent
    - ✓ Evans's medium term goals include:
      - ❖ Driver's Education
      - ❖ Return to Waterfall Canyon once able to demonstrate the above short term goals.
    - ✓ Evan's long term goals include:
      - ❖ Return to home area and live independently
- Decision Making
- Money Management
  - Wants vs. Needs
  - Budget development
  - Banking, Savings & Investing
  - Credit
    - ✓ Purchase Auto
    - ✓ Home
      - Warranties
      - Service Contracts
    - ✓ Credit Cards Management
      - Credit Score
      - Consumer Awareness/Privacy/Avoid Fraud



- What to do if you are in trouble
- Living on Your Own
  - Healthy eating & nutrition
  - Exercise
  - Grocery shopping
  - Housekeeping/Cleaning/Cooking
  - Personal Care
    - ✓ Medical/Dental
    - ✓ Medication Management
    - ✓ Personal Health & Hygiene
    - ✓ Sex Education – brief review
      - STD's
      - Pregnancy
      - Abstinence
      - Safe Sex
      - Resources
    - ✓ Laundry & Care of Clothing
    - ✓ Staying Safe
    - ✓ Traveling
  - Housing Options
    - ✓ Rental (Leases)
    - ✓ Living Arrangements
      - Roommate (Compatibility)
    - ✓ Walk through (previous tenant damages/repairs needed)
    - ✓ What do I need?
    - ✓ Household maintenance
  - Employment
    - ✓ Job Interest Assessment
    - ✓ Job Search Techniques
    - ✓ Job Seeking Skills
    - ✓ Resume Development
    - ✓ Applications
    - ✓ Interviews
      - Role Play
      - What to Wear
    - ✓ Job Maintenance Skills
- Personal Development



- Mission Statement
  - ✓ Virtues: Integrity, Honesty, Empathy, Trust
  - ✓ Strengths, Weaknesses
- The Four Agreements
- Character/Values
- Reputation
- Personal Life Choices
- Respect
  - ✓ Self
  - ✓ Others
  - ✓ Family
  - ✓ Housemates
  - ✓ Community
- Gratitude
- Identify Hobbies and Interests
- Community
  - ✓ Community Service
  - ✓ Volunteering/Giving
  - ✓ Positive Community Member
- Relationships
  - ✓ Communication
  - ✓ Developing Healthy Relationships
    - Boundaries
    - Perspective
  - ✓ Friendships
    - Bullying
  - ✓ Intimacy
    - Violence/Abuse
  - ✓ Co-Dependency
  - ✓ No means no
- Feelings
  - ✓ Impulse control
  - ✓ Anger management
- Time Management/Prioritize/Balance
  - ✓ Daily Goals & Reflection
  - ✓ Maintain calendar with appointments, work schedules, etc.
  - ✓ Appropriate use of electronics



- Resourcing/Information Skills
- Problem Solving Skills
  - ✓ Handling Problem Situations
  - ✓ Resource Management
  - ✓ Goal Setting
  - ✓ Risk Taking-Acceptable/Unacceptable
- Education
  - Driver's Education
  - Learn Restaurant Business

The curriculum is specifically designed to meet Evan's needs and is supported by learning in the classroom environment then practicing the skills in real life. Additional resources are sought as needed to support the success of the client.

Signature: \_\_\_\_\_ On File \_\_\_\_\_ Date: \_\_\_\_\_

Q & A ASSOCIATES 000107

## Life Skill Assessment

(Wanna get him back)

Short term

① MONEY

② APARTMENT + HOUSING

③ JOB

Med Term

① DRIVERS Ed

② bills

③ cooked  
Long term① ~~complete Pro~~  
complete Pro

② home

③ inde

Thursday  
Application  
Restaurants

DATE:

SOURCE: Spiritual Assessment

Topic Points

NOTES

Faith or Beliefs

What is your faith or belief?

both

Do you consider yourself spiritual or religious?

no

What things do you believe in that give meaning to your life?

friends home

Importance &amp; Influence

Is it important in your life?

friends home

What influence does it have on how you take care of yourself?

How have your beliefs influenced your behavior

some

Community

Are you part of a spiritual or religious community?

no

Is this of support to you and how?

no

Is there a person or group of people you really love or who are really important to you?

no

Address

How would you like me, your coach, address these issues?

2.

SUMMARY:

## life skills assessment

## Daily Living

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I know where to go to get on the Internet.					✓
I can find what I need on the Internet.					✓
I know how to use my email account.					✓
I can create, save, print and send computer documents.	✓				
I know the risks of meeting someone in person that I met online.					✓
I would not post pictures or messages if I thought it would hurt someone's feelings.			✓		
If someone sent me messages online that made me feel bad or scared, I would know what to do or who to tell.	✓				✓
I know at least one adult, who would take my call in the middle of the night if I had an emergency.					✓
When I shop for food, I take a list and I compare prices.				✓	✓
I can make meals with or without using a recipe.			✓		
I think about what I eat and how it impacts my health.					✓
I understand how to read food product labels to see how much fat, sugar, salt, and calories the food has.					✓
I know how to do my own laundry.					✓
I keep my living space clean.			✓		
I know the products to use when cleaning the bathroom and kitchen.	✓				
I know how to use a fire extinguisher.					



## life skills assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I know where I can get help with an Income tax form.	✓				
I can take criticism and direction at school or work without losing my temper.	✓				
I know how to prepare for exams and/or presentations.					✓
I know where I can get tutoring or other help with school work.	✓				
I look over my work for mistakes.			✓		
I get to school or work on time.			✓		
I get my work done and turned in on time.					✓

## Career and Education Planning

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I know how to find work-related Internships.	✓				
I know where to find Information about job training.					✓
I can explain the benefits of doing volunteer work.					✓
I have recently talked to an adult who works in a job I would like to have.	✓				
I have graduated from High School					

POWER

FAMILY

## life skills assessment

## Housing &amp; Money Management

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I understand how interest rates work on loans or credit purchases.	✓				
I understand the disadvantages of making purchases with my credit card.	✓				
I know the importance of a good credit score.	✓				
I know how to open a bank account	✓				
I know how to write a check	✓				
I know how to balance my bank account.	✓				
I put money in my savings account when I can.			✓		
I know an adult who would help me if I had a financial emergency.	✓		✓		
I use online banking to keep track of my money.			✓		
I know the advantages and disadvantages of using a check cashing or payday loan store.	✓				
I know how to find safe and affordable housing.	✓				
I can figure out the costs to move to a new place, such as deposits, rents, utilities, and furniture.	✓				
I know how to fill out an apartment rental application.	✓				
I know how to get emergency help to pay for water, electricity, and gas bills.	✓				
I know what can happen if I break my rental lease.	✓				
I can explain why people need renter's or homeowner's insurance.	✓				
I know where to obtain financial advice.	✓				

POWER

FAMILY

## life skills assessment

## Relationships and Communication

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I can speak up for myself.					✓
I know how to act in social or professional situations.					✓
I know how to show respect to people with different beliefs, opinions, and cultures.					✓
I can describe my racial and ethnic identity.					✓
I can explain the difference between sexual orientation and gender identity.					✓
I have friends I like to be with who help me feel valued and worthwhile.					✓
I am adopted?					✓
I get along well with my parents					✓
I get along well with my siblings					✓
I get along well with my extended family					✓
I know my birth family	✓				
I want to find out about my birth family					✓
My relationships are free from hitting, slapping, shoving, being made fun of, or name calling.					✓
I know the signs of an abusive relationship.	✓				
I think about how my choices impact others.					
I can deal with anger without hurting others or damaging things.					
I show others that I care about them.					



## Life Skills Assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I plan for the expenses that I must pay each month.	✓				
I keep records of the money I am paid and the bills I pay.	✓				
I know what happens in my state if I am caught driving without car insurance or a driver's license.				✓	
I can explain how to get and renew a driver's license or state ID card.	✓				
I can figure out all the costs of car ownership, such as registration, repairs, insurance, and gas.	✓				
I know how to use public transportation to get where I need to go.					✓

## Work and Study Life

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I know how to develop a resume.			✓		
I know how to fill out a job application.					✓
I know how to prepare for a job interview.					✓
I know what the information on a pay stub means.	✓				
I can fill out a W-4 payroll exemption form when I get a job.	✓				
I know what employee benefits are.	✓				
I know what sexual harassment and discrimination are.					✓
I know the reasons why my personal contacts are important for finding a job.			✓		
I know how to get the documents I need for work, such as my Social Security card and birth certificate.					

## life skills assessment

## Self Care

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I can take care of my own minor injuries and illnesses.		✓			
I can get medical and dental care when I need it.	✓				✓
I know how to make my own medical and dental appointments.	✓				✓
I know when I should go to the emergency room instead of the doctor's office.	✓				✓
I know my family medical history.	✓				
I know how to get health insurance.	✓				
I bathe (wash up) daily.					✓
I brush my teeth daily.					✓
I know how to get myself away from harmful situations.					✓
I have a place to go when I feel unsafe.	✓				
I can turn down a sexual advance.					
I know ways to protect myself from sexually transmitted diseases (STDs).					✓
I know how to prevent getting pregnant or getting someone else pregnant.					✓
I know where to go to get information on sex or pregnancy.					✓

POWER

## Life skills assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I know what type (college, trade school) education I need for the work I want to do.					
I know how to get into the school, training, or job I want after high school.	✓				
I know how to find financial aid to help pay for my education or training.	✓				
I have attended college classes	✓				✓
I have declared a major	✓				

## Looking Forward

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I believe I can influence how my life will turn out.					✓
I can describe my vision for myself as a successful adult.					✓
I would like to use my experience to help other youth.	✓				
I believe my relationships with others will help me succeed.	✓				
I feel I am ready for the next phase of my life.					✓
Most days, I am proud of the way I am living my life.			✓		
Most days, I feel I have control of how my life will turn out.			✓		



## Post Secondary/Training Assessment

## 1 - Career &amp; Education Planning

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I have declared my major	✓				
I would like to do an internship in my major.	✓				
I know the requirements to transfer from my current school or program to another one.	✓				
I plan to continue my education or training beyond my current program.	✓				
I am confident I can find a full time job.					✓

## 2 - Study and Technology

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I have taken a study skills class or workshop.					
I can read and understand my textbooks and assignments.					✓
I have a place to study where I can concentrate on my work.					✓
I hand in my assignments on time.	✓				
I know what plagiarism is.	✓				
I use a calendar or day-timer to plan out my time, and keep track of assignment deadlines.				✓	
I can usually identify the important points in a lecture.					
I can locate information both at the library and on the Internet.					✓
I am good at taking notes in class.					✓
I participate in a formal or informal study group.	✓				
I always review and check my work before I hand it in.	✓				
When I miss a class, I ask the professor, instructor or another student what I missed.	✓				



## Post Secondary/Training Assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I have held a job				✓	
The people at my job supported me doing well in school.				✓	
I plan out my long-term projects so that I get them done on time.				✓	
I can manage my family or child care responsibilities and still do well in school.	✓				
I have regular access to a computer and printer.	✓				✓
I know how to use a word processing program such as Microsoft Word.					✓
I use a computer keyboard.					✓
I regularly use the Internet for school work.			✓		✓
I regularly use email.			✓		✓
I know where a computer lab is located.					✓
I submit my assignments online when needed.					✓

## 3 - Motivation and Participation

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I have a strong desire to finish college or my training program.	✓				✓
I am satisfied with my grades.					✓
I can name someone I admire who has graduated from college or a training program.	✓				
I am proud to be a student at my school or training program.	✓				
I have friends at school who care about my success.				✓	
I attend school events, such as concerts, movies, pep rallies, lectures, or sports events.					✓



## Post Secondary/Training Assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
My school or program is a good match with my beliefs and values.	✓				
Before registering for classes, I talk to my academic advisor.	✓				
My advisor takes a personal interest in me and cares about my success.	✓				
I know how many credits I have and how many are needed to graduate.	✓				
I participated in a student orientation or summer start program.	✓				
I feel I fit in at my school or program.	✓				
I attend all my classes.	✓				✓
I am academically well prepared for college or training.	✓				✓
I ask questions and participate in class discussions.	✓				✓
I know my professors' or instructors' office hours, email and phone contact information.	✓				✓
I know what is expected of me in my classes.	✓				✓
I meet with my professors or instructors if I have questions about coursework or assignments.	✓				✓

## 4 - School or Program

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
My campus is a safe place.					✓
I feel comfortable at school or in my program.	✓				
I know about the Equal Opportunities Program (EOP).	✓				
Tutors are available to me.					✓

## Post Secondary/Training Assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I feel respected at my school or program.					✓
Instructors/professors listen to what I have to say.					✓
There is a good connection between what I learn at school and my own background and culture.			✓		✓
The staff at my school respects my culture and background.					✓
At the school or program I attend, it is easy to get the classes I need to graduate.					✓
My school or program is preparing me for the job or career I want to go into after I graduate.	✓				
I see instructors, professors and staff at my school or program from my cultural background.	✓				
My school or program offers social or cultural activities or opportunities.					✓
My school or program offers adequate support services - such as tutoring, mentoring, technology assistance, study skills classes, counseling, etc.					✓
My instructors or professors expect me to do well and care about my success.					✓
My school or program encourages contact among students from different backgrounds.					✓
My living situation is safe and secure.					✓
I have a reliable way of getting transportation to school.					✓

## 5 - Supports

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I can name at least one person outside of school who expects me to graduate.					✓
Some of my family or friends understand my education, training or career plans.					✓
I have shared my goals with someone I trust.					✓

## Post Secondary/Training Assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I need support from others to achieve my education goals.			✓		
When I have a problem at school, I ask a trusted friend, family member, professor, instructor, or counselor for advice.					✓
I am comfortable using support services such as tutoring, counseling, academic advising, or student health.	✓				
My family or friends are supportive of my college or training goals.				✓	
I have participated in a college success class or workshop.				✓	
I know what mentoring programs are available.	✓				
I know what services are offered at the student counseling center.					✓
I know what services are offered at the student housing office.				✓	✓
I know where to get tutoring, study skills, and time management help.	✓			✓	
I know where to get information about jobs or career assistance.	✓			✓	
My spiritual needs are being met.	✓				

## 6 - Health

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
Overall, I am satisfied with my health.				✓	
I know how to access health care services.	✓				✓
I know how to access vision care services	✓				✓

## Post Secondary/Training Assessment

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I know how to access dental care services.					✓
I have health insurance coverage.					✓
I have access to healthy meals every day.					✓
I know where to get assistance with drug or alcohol related issues.	✓				
I am satisfied with the amount of exercise I get.					✓
I fill and renew my medication prescriptions as needed.					✓
I don't get enough sleep.					✓
I know what to do when I feel lonely and isolated.					✓
I know how to access counseling services.	✓				
I am comfortable getting help when I feel depressed.	✓				
I can get the therapy I need.					✓

## 7 - Financial Aid &amp; Budgeting

Are the following statements like me	No	Mostly No	Somewhat	Mostly Yes	Yes
I meet with a school financial aid counselor several times a year.					✓
My FAFSA application is completed and sent in prior to the deadline.					✓
I know how to read and understand my Student Aid Report (SAR).	✓				
I am not worried about my student loan debt.					✓
I have someone to help me develop my education, living, transportation and health budget.					✓
I am able to pay all my school bills.					✓
Credit card debt is not a problem for me.	✓				

# Life Skills Strengths/Needs Assessment

## Guideline Questions

### STRENGTHS

### NEEDS

#### Special Interests/Recreation/Use of Leisure Activities

1. How do you spend your free time? *video games*
2. What are your hobbies? *hanging out with friends*
3. What sports do you like to play? *ch*
4. Do you play a musical instrument or sing?
5. Do you like to read? What types of reading materials do you like? *NO*
6. Do you participate in any cultural activities?
7. Do you belong to any clubs or organizations?

#### Education

8. What do you like most about school? *nothing*
9. What are your favorite subjects?
10. What school are you attending now?
11. What is the highest grade you have completed?
12. Do you have a favorite teacher? What subjects does he/she teach?
13. Do you speak more than one language?
14. What are your current educational goals?
15. What are your educational plans after high school?
16. Have you contacted colleges or vocational schools?
17. Have you explored financial aid programs?
5. Are there any school subjects that you need help with? Which ones?
6. Are you open to working with a tutor?
7. Do you get along well with your teachers? Classmates?
8. Would you like to learn a second language?
9. Do you need help setting or achieving your current educational goals?
10. Do you need help in developing educational plans after high school?
11. Are you interested in finding out additional information about colleges and/or vocational programs?
12. Do you have concerns about going to college or taking additional specialized training?
13. If you were having problems in school, what kind of help would you want?

#### Employment

18. Have you ever worked? *Yes, at a restaurant*
19. Have you ever applied for working papers?
20. What types of jobs have you held? *cashier*
21. Are you currently working? What is your current position?
22. What jobs have you liked best?
23. What part of your job did you enjoy doing?
24. Have you decided on a career? What?
25. Have you ever completed a career interest inventory?
26. Do you know the importance of having the
14. Are you interested in finding a job?
15. What kind of work are you interested in?
16. Do you need working papers?
17. Are you interested in finding out more about careers?
18. Do you need an original birth certificate and/or social security card?
19. Do you need to develop a resume and/or fact sheet?
20. Do you need to develop a plan for waking up on time?

Adapted from Scott, R. and Houts (1978). Individualized Goal Planning with Families in Social Services. Currently part of New Jersey's Life Skill Assessment System, 1996. Dorothy Ansell and Joan Morse

52. Do you purchase your own clothing and personal care items? Are you pleased with your ability to make good purchases?
53. Are you a conscientious shopper? Do you comparison shop?
54. Have you ever:
55. Purchase a money order?
56. Saved up for a big purchase?
57. Opened a bank account?
58. Written a check?
59. Filed an income tax form?
60. Paid your own bills? What kind?
61. Made out a budget for your own living expenses?

you be saving for?

37. Would you like help in enhancing your shopping skills?
38. Would you like to learn more about:
39. Purchase a money order?
40. Saved up for a big purchase?
41. Opened a bank account?
42. Written a check?
43. Filed an income tax form?
44. Paid your own bills? What kind?
45. Made out a budget for your own living expenses?

### Health

62. How would you rate your physical health? *good*
63. Are you comfortable with your personal appearance?
64. Where do you go for health care and checkups?
65. When did you last see a doctor and a dentist?
66. Do you take any kind of medication? Who administers it?
67. What type of regular physical exercise do you get?
68. Have you ever:
69. Called to make your own medical appointments?
70. Used a thermometer to take your temperature?
71. Taken a first aid course?
72. Learned about birth control and sexually transmitted diseases?
73. Do you have a copy of your own medical history and your family's medical history?
74. When you are sick, where do you seek medical help?
46. Do you need to see a doctor or dentist?
47. Are you concerned about any health problems?
48. Are you concerned about your personal appearance?
49. If you are taking medications, do you need to find out more about them?
50. Would you like to start a fitness program?
51. Would you like to learn more about:
52. Scheduling medical appointments?
53. Using a thermometer?
54. First Aid?
55. CPR?
56. Birth Control?
57. Preventing STD's?
58. Do you need to find out more about your medical history and your family's medical history?

### Housing

75. When do you think you will move out on your own? *move out as quickly as possible*
76. Where do you think you will live (part of the city, type of housing, etc.)?
77. What type of housing do you think you would like to live in?
78. Do you understand how to search for your own apartment?
79. Do you understand what it takes to maintain your own apartment?
80. Do you think you will have a roommate or live alone?
59. Would you like to find out more about housing options available to you within and outside the agency?
60. Would you like to learn how other young people have successfully moved out on their own?
61. Would you like to learn about or get help with (least liked aspect of living independently)?
62. What do you need to accomplish before you move out on your own?

Adapted from Scott, R. and Houts. (1978). Individualized Goal Planning with Families in Social Services. Currently part of New Jersey's Life Skill Assessment System. 1996, Dorothy Ansell and Joan Morse



81. What do you think you will like best about living on your own? What do you think you will like the least?
82. What are some things that you have accomplished so far that will make it easier to live on your own?

### Transportation

- |  |  |
|--|--|
| 83. How do you get around the city now?  | 63. Do you need help in getting around city on public transportation?            |
| 84. Can you usually arrange your own transportation for job interviews, work, school, visiting family and friends? | 64. Do you need help in reading subway and bus maps?                             |
| 85. Do you feel safe travelling around the city?   | 65. Do you need help in developing a safety plan for travelling around the city? |
| 86. Are you comfortable with reading a subway and bus map?   | 66. Are you interested in:   |
| 87. Have you ever:   | 67. Taking driver's education?   |
| 88. Taken driver's education?  | 68. Getting a driver's license?  |
| 89. Obtained a driver's license?   |  |

*Driver's license*

following documents for employment:

27. Birth certificate
28. Social security card
29. Do you have a resume of fact sheet to take on future job interviews?
30. Do you have calendar?
31. Do you have the ability to get yourself up in the morning for school or work?

mom dad

Sister 22  
Emily

### Family/Friends

32. Who do you call family?
33. How is your family involved in helping you prepare for life on your own?
34. In what ways are you helpful to your family?
35. Who are your friends?
36. In what ways are you a good friend to others?
37. Which friends or family members would you go to for help?
38. What do you think is important in a dating relationship?
39. Do you have or have ever had a dating relationship?
40. Are you satisfied with your ability to develop, maintain or end those special relationships?
41. Do you have or have your thought about having children of your own?
42. What are your plans for marriage and family?
21. Are you satisfied with your relationship with your family? What, if anything would you like to change?
22. What could your family do to help you now?
23. Are you satisfied with your relationships with your friends? What, if anything, would you like to change?
24. Would you like to develop new friendships?
25. Would you like help in beginning, ending and managing a dating relationship?
26. Have you ever been witnessed or been exposed to violence?
27. If you found yourself in an abusive relationship, how would you rate your ability to end the relationship?
28. Are you satisfied with your relationship with your child(ren)? What, if anything, would you like to change?

### Social / Personal

43. What do like most about yourself? *creativity*
44. If your best friend were here, how would he/she describe you? *Geoffrey 14*
45. Are you comfortable with:
46. Meeting new people?
47. Speaking up for yourself at home, school, work, or with friends?
48. Everyone gets angry from time-to-time. What kinds of things make you angry? What do you do when you get angry? *Angry / Etc*
49. Are you satisfied with the way you handle your anger?
50. Have you ever used a journal to record your personal thoughts and ideas?
29. Is there anything about yourself that you wish were different? What?
30. Would you like to feel more comfortable with:
31. Meeting new people?
32. Speaking up for yourself at home, school, work, or with friends?
33. Would you like to learn other ways to manage your anger?
34. Would you like to use a journal?

listen to music

### Money Management

51. Do you have an allowance or other spending money? Have you rated your ability to manage your money? *allowance / saving*
35. Would you like to enhance your skills at managing money?
36. Do you need to start a savings plan? What would

Adapted from Scott, R. and Houts, J. (1978) Individualized Goal Planning with Families in Social Services. Currently part of New Jersey's Life Skill Assessment System, 1996, Dorothy Ansell and Joan Morse



Evan H.

To be Completed by Client

Please describe primary reason for enrollment:

become  
independent  
help find job

Describe your primary strengths:

Communicating - Ask for help  
push myself when work out  
helping people  
supportive

Areas of interest/major accomplishments

live in wood 10 weeks  
stay healthy  
getting sober  
job @ Restaurant

What challenges have you overcome?

I used to get fight  
A lot when people get  
he angry, take space  
instead of drugs Alcohol,

Describe your relationship with the following:

Father:

don't agree but miss understandings  
most of the time

Mother:

pretty good  
understand where  
I'm coming from

Siblings:

in past not good  
trying to make it  
better

Extended Family:

don't see  
them too much

Friends:

have a lot  
of good influence  
friends they look  
up to me

Teachers/Employers:

~~none~~ respectful  
~~none~~

Describe your relationship with the following:

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of good influence  
friends they look  
up to me

Teachers/Employers:

~~respectful~~ respectful  
~~respectful~~

## Educational History

Highest Grade Level Achieved: 12th

Please describe the following:  
Academic/Vocational Goals:

NO COLLEGE ←

Academic/Vocational Accomplishments:

WORK RESTAURANT

Academic Challenges/Dislikes:

math history

Describe your overall experience with your academic history:

FUN high school

WENT TO VOCATIONAL SCHOOL DID  
NOT FINISH